

County of San Miego

DEPARTMENT OF ENVIRONMENTAL HEALTH HAZARDOUS MATERIALS DIVISION

P.O. BOX 129261, SAN DIEGO, CA 92112-9261 (619) 338-2222 FAX (619) 338-2377; 1-800-253-9933 www.sdcounty.ca.gov/deh/hazmat/hazmat_permits.html



Medical Waste Management Plan

The San Diego County Department of Environmental Health, Hazardous Materials Division is the local agency designated by the California Department of Public Health to implement the Medical Waste Management Act. This law governs the generation, handling, storage, transportation, treatment and disposal of medical waste to protect the public and the environment from potential infectious exposure to disease causing agents.

The Medical Waste Management Plan is a document that describes the types and amount of medical waste generated at a specific location, and indicates how wastes are managed to ensure proper treatment and disposal. All Large Quantity Generators (LQGs generate ≥200 lbs. of medical waste per month) and those Small Quantity Generators (SQGs generate <200 lbs. of medical waste per month) that treat their medical waste onsite are required to complete a Medical Waste Management Plan on the forms prepared by the enforcement agency. [Authority cited California Health and Safety Code § 117600 et seq.]

Small Quantity Generators of medical waste that do not treat their medical waste onsite are not required to complete and submit this form to the local enforcement agency. They are, however, responsible for maintaining on file at their office a document stating how they contain, store, treat, and dispose of any medical waste generated. Completing a Medical Waste Management Plan and keeping at their office can satisfy this requirement.

Attached is a "blank" Medical Waste Management Plan form for your use. Please complete and sign the form and mail the original to the address listed above. Retain a copy for your records. If there are changes in any of the information on your Medical Waste Management Plan, submit a revised form to the address listed above within 30 days of changes. Annual submittal of the Medical Waste Management Plan is not required.

If you have any questions, please contact your area inspector or the Hazardous Materials Division Duty Desk at (619) 338-2231.

Attachment

"Environmental and public health through leadership, partnership and science"

MEDICAL WASTE – DEFINITION OF TERMS

MEDICAL WASTE means biohazardous waste or sharps waste that has been generated during the diagnosis, treatment or immunization of human beings or animals, in research pertaining thereto, in the production or testing of biologicals, or which may contain infectious agents, those organisms classified as Biosafety Level II, III, or IV by the federal Centers for Disease Control and Prevention and may pose a substantial threat to health. Medical waste includes trauma scene waste. Medical waste does not include hazardous waste, radioactive waste, medical solid waste or household waste.

BIOHAZARDOUS WASTE means any of the following:

- (a) Laboratory waste, including, but not limited to, all of the following:
 - (1) Human or animal specimen cultures from medical and pathology laboratories.
 - (2) Cultures and stocks of infectious agents from research and industrial laboratories.
- (3) Wastes from the production of bacteria, viruses, spores, discarded live and attenuated vaccines used in human health care or research, discarded animal vaccines, including Brucellosis and Contagious Ecthyma, as identified by the department, and culture dishes and de-vices used to transfer, inoculate, and mix cultures.
- (b) Human surgery specimens or tissues removed at surgery or autopsy, which are suspected by the attending physician and surgeon or dentist of being contaminated with infectious agents known to be contagious to humans.
- (c) Animal parts, tissues, fluids, or carcasses suspected by the attending veterinarian of being contaminated with infectious agents known to be contagious to humans.
- (d) Waste, which at the point of transport from the generator's site, at the point of disposal, or thereafter, contains recognizable fluid blood, fluid blood products, containers or equipment containing blood that is fluid, or blood from animals known to be infected with diseases which are highly communicable to humans.
- (e) Waste containing discarded materials contaminated with excretion, exudate, or secretions from humans or animals that are required to be isolated by the infection control staff, the attending physician and surgeon, the attending veterinarian, or the local health officer, to protect others from highly communicable diseases or diseases of animals that are highly communicable to humans
- (f) (1) Waste which is hazardous only because it is comprised of human surgery specimens or tissues which have been fixed in formaldehyde or other fixatives, or only because the waste is contaminated through contact with, or having previously contained, chemotherapeutic agents, including, but not limited to, gloves, disposable gowns, towels, and intravenous solution bags and attached tubing which are empty. A biohazardous waste which meets the conditions of this paragraph is not subject to Chapter 6.5 (commencing with Section 25100) of Division 20.
 - (2) For purposes of this subdivision, "chemotherapeutic agent" means an agent that kills or prevents the reproduction of malignant cells.
 - (3) For purposes of this subdivision, a container, or inner liner removed from a container, which previously contained a chemotherapeutic agent, is empty if the container or inner liner removed from the container has been emptied by the generator as much as possible, using methods commonly employed to remove waste or material from containers or liners, so that the following conditions are met:
 - (A) If the material which the container or inner liner held is pourable, no material can be poured or drained from the container or inner liner when held in any orientation, including, but not limited to, when tilted or inverted.
 - (B) If the material which the container or inner liner held is not pourable, no material or waste remains in the container or inner liner that can feasibly be removed by scraping.
- (g) Waste that is hazardous only because it is comprised of pharmaceuticals, as defined in Section 117747. Notwithstanding subdivision (a) of Section 117690, medical waste includes biohazardous waste that meets the conditions of this subdivision. Biohazardous waste that meets the conditions of this subdivision is not subject to Chapter 6.5 (commencing with Section 25100) of Division 20.

SHARPS CONTAINERS are leakproof, rigid, puncture-resistant containers which when sealed cannot be reopened without great difficulty. These containers must be labeled with the words "Sharps Waste" or with the international Biohazard symbol and the word "BIOHAZARD." These containers must be labeled with the Generator's name, address, and phone number in a conspicuous location on the container when first used. Needles and syringes shall not be clipped prior to disposal. All sharps containers must be managed as MEDICAL WASTE.

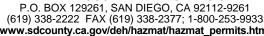
"BIOHAZARD BAG" means a disposable red bag which is impervious to moisture and has strength sufficient to preclude ripping, tearing, or bursting under normal conditions of usage and handling of a waste-filled bag. A Biohazard bag shall be constructed of material of sufficient single thickness strength to pass the 165-gram dropped dart impact resistance test as prescribed by Standard D 1709-91 of the American Society for Testing and Materials and certified by the bag manufacturer. The bags shall be securely tied so as to prevent leakage or expulsion of solid or liquid wastes during future storage, handling, or transport. The bags shall be **RED** in color and conspicuously labeled with the international biohazard symbol and the "Biohazard." The bags shall be labeled with the Generator's name, address, and phone number in a conspicuous location on the bag when first used. If the waste is to be autoclaved, the outer bag may be colorless as long as the inner bag is red and both bags meet the stated strength criteria. All waste in red biohazard bags must be managed as MEDICAL WASTE.

STORAGE AREA WARNING SIGN is: A sign posted at a <u>designated</u> accumulation area used to store medical waste which must read in English, "CAUTION—BIOHAZARDOUS WASTE STORAGE AREA—UNAUTHORIZED PERSONS KEEP OUT" and in Spanish, "CUIDADO-ZONA DE RESIDUOS—BIOLOGICOS PELIGROSOS—PROHIBIDA LA ENTRADA A PERSONAS NO AUTORIZADAS" or in another language determined to be appropriate.

<u>Intermediate</u> storage areas shall be marked with the international biohazardous symbol or the signage noted above. These warning signs shall be readily legible from a distance of five feet.



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Medical Waste Management Plan

Facility Information Business			Unified Program Facility Permit #:		
Name:			Permit #: _		
Type of Business:			Date:/	1	
Address:			CA		
Street No. Street Name		City	State		Zip Code
Person Responsible for implementing the Medical Waste Management Plan					
Name:					
Title:		Phone:	()		_ X
Types of wastes generated					
Sharps – needles, broken glass, blades.		other regulat	dy fluids - liq ed body fluids d with blood o	s, or articles	3
Estimated monthly amount	lbs	Es	stimated mon	thly amou	nt lbs
Laboratory wastes - specimens or microl cultures, stocks of infectious agents, live a attenuated vaccines, and culture media.		excretion, ex	este – waste c udates, or sec are isolated c le diseases.	cretions fro	m humans or
Estimated monthly amount	lbs	Es	stimated mon	thly amou	nt lbs
Waste contaminated with fixatives or chemotherapeutic agents.		Surgical spetissues remove	ecimens – hun ved surgically o	nan or anim or by autops	al parts or sy.
Estimated monthly amount	lbs	Es	stimated mon	thly amou	nt lbs
Pathology waste – recognizable human anatomical parts.		Contaminated animals – animal carcasses, body parts, bedding materials.			
Estimated monthly amount	lbs	Es	stimated mon	thly amou	nt lbs
Other (please specify):		☐ Home Gene	rated Sharps		
Estimated monthly amount	lbs	Es	stimated mon	thly amou	nt lbs
Estimate of <u>TOTAL</u> monthly medical waste generated: lbs					
Method of treatment performed onsite (if applicable):					
☐ Steam Autoclaving ☐ Other state approved alternative technology (please specify below):					

Medical Waste Management Plan

Registered Medical Waste Hauler used to remove untreated medical waste (if applicable): Name: Address: _____ City: _____ State ____ ZIP Code _____ Phone #: (_____) _____X _____ Contact Person:____ Offsite treatment facility to which medical waste is transported (if applicable): Facility Name: City: _____ State ____ ZIP Code ____ Phone #: (_____) X _____ Contact Person: ______ Phone #:(____) ____X ____ I hereby certify to the best of my knowledge and believe the statements made herein are correct and accurate. Type or Print Date: / / Signature: **Emergency Action Plan:** Note: This requirement only applies to Large Quantity Generators of Medical Waste (≥200 lbs/month) Plan to be followed to ensure the proper disposal of medical waste in the event of a natural disaster, treatment system breaks down, power failure, spill, etc. (use additional sheets if necessary):